



British Cane Corso Society

Dog Adoption Application

Return to Miss A Osborne BCCS Rehome co-ordinator 68 Crescent rd Kingston upon Thames Surrey KT2 7RF

IF RETURNING THIS FORM BY EMAIL PLEASE MAKE SURE IT IS A WORD DOC!

Please be aware that your application may take some time to process, you can indicate here how long you are prepared to wait for the right dog for your family:

We also work closely with LBDR and Bullmastiff and Neopolitan rescue, would you like us to pass your details on to these groups? YES/NO

It is a condition of applying to adopt a BCCS Cane Corso that you research the breed as if you were buying a puppy, to that end please register at www.thefocc.com and introduce yourself to the community. All dogs in need also have progress reports in the rescue forum there.

Pet You Are Applying For:

Date:

Applicant/Co-Applicant Information

Last Name:

First Name:

DOB:

Last Name:

First Name:

DOB:

Address:

Post Code:

Home Phone:

Mobile Phone:

Email Address:

Do you own or rent your home?

How long have you lived at this address?

Any plans to move in the near future?

If renting do you have your Landlord's permission to adopt a Corso?

Landlord's contact details:

Family/Household Information

Number of adults in the household:

Relationships:

Have all the adults in the household agreed to this adoption? Yes No

Number of children in the household:

Ages of children:

Have the children had pets before?

Do you expect your current family situation to change?

Is anyone in the household allergic to pets? Yes/No Who?

Why would you like to adopt a Corso from us? (continue on separate sheet if nec)

The aim of the BCCS is to promote responsible ownership of the Cane Corso and to educate and guide the public as to the correct standard, temperament, health and capabilities of this well rounded and stable breed.



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Employment Information

Employer:

Position held:

Hours worked:

How long have you been with this employer?

Work Phone:

What arrangements are in place to care for your Corso should your work hours increase/you become unemployed?

Pet Information

Please give information on all recent pets alive or deceased.

Names

Breeds

Ages

Genders

Spayed/Neutered

Where are they now?

**Have you ever given an animal away or relinquished an animal to a shelter?
If yes, what were the circumstances?**

Veterinarian Information

Veterinarian's Name:

Veterinarian's Phone:

When was your current pet's last visit to a veterinarian and why?

New Pet Information

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How long have you been looking for a pet?

How much time are you prepared to allow for your new pet to adjust to your home?

Are you able to afford a bill of £200-£800 (or more) for emergency veterinary care? Yes No

How much do you expect to spend on maintenance for your pet in a year?

Are you committed to providing a responsible home for your pet's entire life (15+ years)? Yes No

If you have to move, what do you plan to do with your pet(s)?

Who in the household will be the dog's primary care giver?

When you are out of town, who will be the dog's primary care giver?

In the case of couples, what thought have you given to the dog's needs in the case of a relationship breakdown?

In case of emergency, who will care for your dog?

Where will the dog be kept during the day? During the night?
How many times per day do you plan to take your dog outside?

Do you have a fenced in garden? Yes No If yes, what size and what type?

How many hours per day will your dog be left alone?

What would you do if your dog develops a problem with:
Digging:

Barking:

Chewing:

Separation Anxiety:

Aggression:

References

Please list 3 personal references below.

1.

(Name) (Relationship) (Phone Number)

2.

(Name) (Relationship) (Phone Number)



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3.

(Name) (Relationship) (Phone Number)

By signing below, I certify that the information I have given is true. I understand that The British Cane Corso Society reserves the right to deny my application for any reason. I further authorise the investigation of all statements in this application.

Signatures

Applicant: Date:

Co-Applicant: Date:

Further information (if needed)